BEST AVAILABLE COPY

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

09932319

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			16				Г	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			16 minus 20=		• —			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			2 minus 3 =					X40=		OR	X80=		
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					-135=		OR	+270=		
* If	the difference	in column 1 is	less than zero, enter "0" in			column 2	L	OTAL		OR	TOTAL	7/0	
CLAIMS AS AMENDED - PART II							·	0		1011	OTHER		
	<u> </u>	(Column 1)	(Column			(Column 3)	s	SMALL ENTITY			R SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=)	(\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		=	;	(40=		OR	X80=		
	FIRST PRESE	NTATION OF MI	JLTIPLE DEI	PENDENT	CLAIM			135=		OR	+270=		
							L	TOTAL		OB	TOTAL		
	`	4	•	(0.10)			ADD	OIT. FEE		Un ,	ADDIT. FEE		
		(Column 1) CLAIMS		(Colur		(Column 3)			4 D D L			4001	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	,	(\$ 9=	·	OR	X\$18=	·	
	Independent	•	Minus	***		=		< 40=		OR	X80=		
	FIRST PRESE	NTATION OF MI	JETIPLE DEI	PENDEN	CLAIM		J	135=		OR	+270=		
							ADI	TOTAL NT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colu	mn 2)	(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	\	(\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		=		<40=			X80=		
	FIRST PRESENTATION OF MI		JLTIPLE DEPENDEN		CLAIM		J ├			OR	,.00=		
	If the enterin enter	mn 1 is loss than t	ho ontre in cale	ima 2 iziriti	. "∩" in	oluma 3	+	135=		OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
		nber Previously Pa					er found	in the app	ropriate box	in col	lumn 1.		